

Rasheke Boyd, 06A4090
Cadre Program
Southport Correctional Facility
P.O. Box 2000
Pine City, New York 14871-2000

FILED
CLERK'S OFFICE
U.S. DISTRICT COURT E.D.N.Y.
★ JAN 15 2014 ★
LONG ISLAND OFFICE

January 9, 2014

Clerk of Court for the Hon. Joseph F. Bianco, Judge
U.S. District Court
~~Eastern District of New York~~
U.S. Courthouse, 225 Cadman Plaza East
Brooklyn, New York 11201

Re: Boyd v. Griffin (Writ of Habeas Corpus
Case No.: 11-CV-324 (JFB))

Dear Sir/Madam:

Please be advised I have received your letter dated January 2, 2014. I am faced with a dire situation as I am gathering and compiling the record you requested. I do not presently have funds in my account for postage and I am currently requesting an advance from the facility for this purpose. I am not sure how the record I submitted on march 18, 2013 was lost, however, I do have a receipt via disbursement from the facility for postage which is correctly addressed to this court. In the event that the facility (Southport Correctional) does not grant me the advance, I pray the court will allow me an extension to accumulate the funds I will need for postage. Further more, I would appreciate the courts assistance as I have encountered a tremendous amount of resistance when attempting to send out legal mail through this facility's mail room on numerous occasions.

Thank you very much for your assistance in this matter.

RECEIVED
JAN 15 2014
EDNY PRO SE OFFICE

Respectfully submitted;

Rasheke Boyd

Rasheke Boyd

STATE OF NEW YORK - DEPARTMENT OF CORRECTIONAL SERVICES

DISBURSEMENT OR REFUND REQUEST

CELL LOCATION

NAME Bach to Bay DATE 3-24 20 12

CODE TYPE

--	--	--

INMATE NUMBER

--	--	--	--	--	--	--	--

"SHORT" NAME

--	--	--	--

CHECK/ORDER NUMBER

--	--	--	--	--	--

RIGHT ADJUSTED WITH LEADING ZEROS

FIRST INITIAL
FIRST 3 OF LAST NAME

COMMISSARY PRODUCT GROUP

☐

AMOUNT \$

--	--	--	--	--	--	--	--

SENT TO CODE
(SEE TABLE B-6)
☐
ITEM
DESCRIPTIONPostage OnlySENT TO OR
PURCHASE FROM

LAST NAME	FIRST NAME	MI	SUFF
<u>Edna T. Schenck</u>	<u>Adriana</u>	<u>A</u>	<u>Prisoner</u>
ADDRESS		APT. NO.	
<u>Department of Correctional Services</u>			
CITY	STATE	ZIP CODE	
<u>Albany</u>	<u>New York</u>	<u>12201</u>	

I HEREBY ACKNOWLEDGE EXPENDITURE OF THE
AMOUNT TO BE DEDUCTED FROM MY INMATE
ACCOUNT

APPROVED

(SOURCE AREA)

DATE

3/24/12

APPROVED

(BUSINESS OFFICE)

DATE

3/26/12

INMATE SIGNATURE

FORM 2708 (REV. 8/93)

Original -Business Office Yellow -Approving Office Pink -Inmate

STATE OF NEW YORK - DEPARTMENT OF CORRECTIONAL SERVICES

DISBURSEMENT OR REFUND REQUEST

CELL LOCATION

NAME Bach to Bay DATE 3-24 20 12

CODE TYPE

--	--	--

INMATE NUMBER

--	--	--	--	--	--	--	--

"SHORT" NAME

--	--	--	--

CHECK/ORDER NUMBER

--	--	--	--	--	--

RIGHT ADJUSTED WITH LEADING ZEROS

FIRST INITIAL
FIRST 3 OF LAST NAME

COMMISSARY PRODUCT GROUP

☐

AMOUNT \$

--	--	--	--	--	--	--	--

SENT TO CODE
(SEE TABLE B-6)
☐
ITEM
DESCRIPTIONPostage OnlySENT TO OR
PURCHASE FROM

LAST NAME	FIRST NAME	MI	SUFF
<u>Joseph E. Bardo</u>	<u>Tudor</u>		
ADDRESS		APT. NO.	
<u>U.S. Courthouse 225 Columbia Plaza East</u>			
CITY	STATE	ZIP CODE	
<u>Brooklyn</u>	<u>New York</u>	<u>11201</u>	

I HEREBY ACKNOWLEDGE EXPENDITURE OF THE
AMOUNT TO BE DEDUCTED FROM MY INMATE
ACCOUNT

APPROVED

(SOURCE AREA)

DATE

3/26/12

APPROVED

(BUSINESS OFFICE)

DATE

3/26/12

INMATE SIGNATURE

FORM 2708 (REV. 8/93)

Original -Business Office Yellow -Approving Office Pink -Inmate

SOUTHPORT CORRECTIONAL FACILITY

P.O. BOX 2000

PINE CITY, NEW YORK 14871-2000

NAME: Rasheke Boyd DIN: 06A4090

SOUTHPORT



Correctional Facility



UNITED STATES POSTAGE
PITNEY BOWES
02 1M \$ 00.46⁰
0004255402 JAN 13 2014
MAILED FROM ZIP CODE 14871

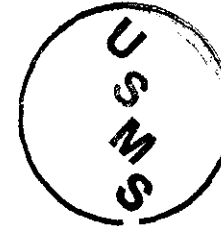
RECEIVED
IN CLERK'S OFFICE
U.S. DISTRICT COURT E.D.N.Y.

JAN 15 2014

LONG ISLAND OFFICE

★ Clerk of U.S. District Court
East District of New York
100 Federal Plaza

Central Islip, New York 11722-4438



11722-4438



"Legal"
mail